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PTO/SB/82 (10-00)

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ATTORNEY OR  
AUTHORIZATION OF AGENT**

Application Number	09/659,473
Filing Date	11 September 2000
First Named Inventor	David Whittam
Group Art Unit	3711
Examiner Name	Passaniti, S
Attorney Docket Number	3006-300

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

☒ A Power of Attorney or Authorization of Agent is submitted herewith.

OR

☒ Please change the correspondence address for the above-identified application to:☒ Customer Number 29502

OR

<input type="checkbox"/> Firm or Individual Name	BAKER & EDDY				
Address	12625 High Bluff Drive, Suite 203				
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City	12625 High Bluff Drive, Suite 203				
Country	USA	State	CA	ZIP	92130
Telephone	(858) 350-9520	Fax	(858) 350-9570		

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Name	David Whittam
Signature	
Date	12-26-01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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PTO/SB/81 (02-01)

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Application Number	09/659,473
Filing Date	11 September 2000
First Named Inventor	David Whitlam
Group Art Unit	3711
Examiner Name	Passaniti, S
Attorney Docket Number	3006-300

I hereby appoint:

☒ Practitioners at Customer Number 29502

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☒ Practitioner(s) named below:

Name	Registration Number
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Michael P. Eddy	42,505

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Address					
City	San Diego	State	CA	ZIP	92130
Country	USA				
Telephone	(858) 350-9520	Fax	(858) 350-9570		

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

**SIGNATURE of Applicant or Assignee of Record**

Name	David Whitlam
Signature	
Date	12-26-01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

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